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STEAM

VA Strategies to Educate and Address Menopause

Newsletter



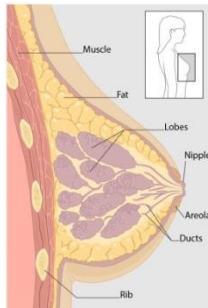
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Miami VA
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October 2015

Breast Health

Breast Basics



Women's breasts are made glandular tissue, fat, blood : vessels, and nerves. Each breast has up to 20 sections of glandular tissue called lobes. Every lobe has smaller sections

called lobules where milk is made. The nipple is the small, raised area at the tip of the breast. The areola is the darker-colored skin around the nipple.

Breast also contains lymph vessels that helps your body fight disease and infection. The vessels carry lymph to lymph nodes (small, bean shaped glands). Lymph nodes are under the arm (near the breast) and all over the body and are part of the lymph system.

Breast Cancer Symptoms

Breast cancer is often found during early screening, before a woman has any symptom. Still, you should know how your breasts normally look and feel in order to report unusual changes to your doctor. See your doctor if you notice:

- A lump or thick/firm tissue in or near your breast or in your arm pit
- A change in your breast's shape or size
- Nipple discharge that is not breast milk
- Skin changes on breast, areola, or nipple (itching, scaling, redness, etc.)
- Changes in your nipples such as them turning into the breast

Men and women can develop breast cancer, but breast cancer in men is rare

Most breast changes are not cancer and a breast lump can be a cyst (fluid-filled lump that is not cancer). Early breast cancer is not usually painful. If you notice a change in your breast or pain don't put it off and call your doctor.

Early Detection... Two words that may save lives

What is a mammogram?

Mammograms are low-dose x-ray exams of the breasts that look for unusual changes in breast tissue that cannot be felt during a clinical breast exam. It is used for women who have no breast complaints and for women who have symptoms. Breast changes occur in almost all women but most are benign (not cancerous).

What is the best method of detecting breast cancer as early as possible?

A high-quality mammogram and a clinical breast exam (performed by your doctor) is the most effective way to detect breast cancer early. Finding breast cancer early raises a woman's chances for successful treatment.

Mammograms have benefits and limitations. Some cancers cannot be found by a mammogram, but they may be found in a clinical breast exam.

How often should I get a mammogram?

A mammogram is one of the best ways to detect breast cancer. The VA encourages all women ages 50-75 to get mammograms every 2 years. Women ages 40-50 and older than 75 should talk to their PACT Team about risks and benefits of mammograms and make a decision based on their risk factors.

The VA excels at breast cancer screenings and outperforms private health systems.

What can mammograms show?

A radiologist who specializes in mammography looks at the x-rays for changes and differences in each breast including calcifications, distortions and masses. They compare the most recent and past mammograms to compare and check for changes.

Breast Self-Exam



While lying down, use the three middle fingers and apply three levels of pressure in a circular motion. Follow an up and down pattern.



Check for changes with hands on hips and chest muscles flexed.



Examine underarm while upright, with arm slightly raised.



Breast self-exam: Manual inspection (reclining)



With fingertips close together, gently probe each breast in one of these three patterns

You should regularly check your own breasts for lumps or other changes by conducting a breast self-exam (BSE) but this Exam should not take the place of routine clinical breast exams and mammograms.

If you decide to do a BSE, remember that it is normal for breasts to feel uneven and a little lumpy. Changes can occur because of pregnancy, aging, menopause, menstrual cycles, or from taking birth control pills or other hormones and during a menstrual period. If you notice any unusual changes, contact your doctor.

For more information on breast health and menopause please visit our websites at:

www.menopause.varesearchfoundation.com

www.miami.va.gov/menopause

Breast cancer risk factors and prevention

Factors that affect a woman's risk of breast cancer include:

- Risk increases as women age. Women over age 50 are more likely to get breast cancer.
- Women who had cancer in one breast are more likely to get it in the other breast.
- Having a close family member who had breast cancer increases risk. Risk rises if they were diagnosed before age 40 and if more than one family member had breast cancer.
- Inheriting gene mutations such as BRCA1 and BRCA2 increases your risk. The VA offers genetic testing and you may want to talk to a genetic counselor about your risk.
- Women whose breasts have more dense tissue instead of fatty tissue.
- Getting your first menstrual period before age 12 and reaching menopause after age 55 increases breast cancer risk.
- Using menopausal hormone therapy for more than 5 years increases breast cancer risk.
- Radiation therapy to the chest raises risk depending on the dose and age of treatment.
- Risk after menopause is higher in overweight or obese women.
- The more alcohol a woman drinks, the greater her risk.
- Women who do not exercise and have not been active throughout life are at higher risk.
- In the US, white women have the highest breast cancer rates. However, African-American women are more likely to die from breast cancer due to later diagnosis.

Did You Know?

Women Veterans who develop breast cancer have their treatment completely coordinated through the VA.

The overall 5-year survival rate from breast cancer is 90%. If caught while it hasn't spread from the breast, survival increases to almost 99%.

The VA has led the nation in breast cancer screening for over 15 years. We have the highest scores of making sure women get their mammograms.

VA Links

www.myhealth.va.gov

This is the link to the My HealtheVet page. There you can learn all the ways it can help you stay connected to your healthcare team, how to enroll, reorder medications, etc. Once enrolled in the My HealtheVet you can participate in our MEANS program.

All information for this newsletter can be found at:
www.womenshealth.gov
www.nia.nih.gov
www.va.gov

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Marlene Fletcher, MD—Mammography



Dr. Marlene Fletcher received her Bachelor's degree from the University of Miami and her medical degree at the Miller School of Medicine in 1981 at the same facility. Upon graduation she completed a year in Pathology at JMH and the VA, followed by a residency and fellowship in Radiology at Mount Sinai Medical Center in Miami Beach. Dr. Fletcher is certified by the American Board of Radiology.

She has been in practice in Radiology since completing her training. Dr. Fletcher has specialized in mammography for close to 20 years and has worked at the Bruce W. Carter

Medical Center and VA's Broward Clinic for the last 8 years. Dr. Fletcher was integral in developing and building the breast center here at the Miami VA Health Systems and is proud to boast state of the art equipment.

She is the Medical Director of Mammography at our facility, interpreting mammograms and performing ultrasound and biopsies. Dr. Fletcher served on the National Mammography Advisory Committee in 2010. She enjoys working with the Veteran population and loves what she does. She finds fulfillment in finding breast cancer at the earliest stage and smallest size so that it is more likely to be cured. She takes pride in linking her patients with cancer to the breast services available at the Miami VA.